|  |  |
| --- | --- |
| **Prescribed Use of 1-2MP in MDHS 25** **Audit of Records Cover Sheet** |  |
| Annual Audit  | 1 January 20XX to 31 December 20XX |

|  |  |
| --- | --- |
| **Name:** |  |
| **Membership no:** |  |
| **Instructions for completion:** |
| Please complete Section 1 by ticking the relevant boxes. Section 2 must be completed only if there have been exceptional circumstances. |
| **SECTION 1 – ROUTINE RECORDS** |
| I enclose the following records: |
| 1. Local Standard Operating Procedure
 |[ ]
| 1. Individual Work Record Sheet for each job
 |[ ]
| **SECTION 2 – EXCEPTION RECORDS** |  |
| I enclose the following records: |  |
| 1. Records of any discrepancies between the amount of sampling media ordered and returned to the lab *(Ref. SOP paras 5.2, 9.1, 10.1, 11.1, 11.2)*
 |[ ]
| 1. Records of whole consignments of sampling media returned to the laboratory to be destroyed. *(Ref. SOP para 12.4)*
 |[ ]
| 1. If you have used a laboratory other than HSL, RPS Laboratories Ltd or IOM Consulting Ltd:-

Written confirmation from the laboratory that they hold a Home Office licence to possess and supply Schedule 1 drugs. *(Ref. SOP para 4.1, 4.2)* |[ ]
| 1. Any other incidents. *(please specify)*
 |[ ]